

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	TD		5 30 00
O.I.P.E. CLASSIFIER		8	6 00
FORMALITY REVIEW	RE	70816	07-17-00
RESPONSE FORMALITY REVIEW	LH	70815	11-25-00

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)... Canceled A Appeal
+ Restricted O Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	✓	5/2
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
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If more than 150 claims or 10 actions
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